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COVER LETTER

Department of State **Division of Corporations** P. O. Box 6327 Tallahassec, FL 32314

SUBJECT: North Port Lodge NO 764, Loyal Order of Mose, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee

□ \$78.75 Filing Fee &

Certificate of Status

□\$78.75

□ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Gene Herbst
Name (Printed or typed)

14156 TAMIAMI TrAIL

NORTH POST, FL 34287
City State & Zin

941 426 2126

Daytime Telephone number

Lodge 764@ MOOSCUNITS, ORG E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	<u>NAME</u> he corporation shall be: <u>NORTH PorT L</u>	. odge NO71	64 Loyal order of Miose	Inc.
ARTICLE II	PRINCIPAL OFFICE	·	ŕ	
	Principal street address:		Mailing address, if different is:	
14	156 TAMIAMI TrAIL			
No	orth Port, FL 34287	<u> </u>		
	,			
ARTICLE III	I PURPOSE		· · · · · · · · · · · · · · · · · · ·	
	or which the corporation is organized is:	NOT- FOR	- Profit OrganisATION	
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ARTICLE IV	MANNED OF ELECTION The manner	in addish the disc.	ctors are elected and appointed: BALL	d
	MANNER OF EELETTON THE HAMILE		tors are elected and appointed. 1-7-1-1	
<u> </u>	NE GENTLEM	0813111P		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS .		
Name and Tit	le: Gene Herbst (A) Administrates.	Name and Title	Terry Seal (V)	
Address	Administrator.	Address:	VICE PRESIDENT	
Muuress	671 Alvarado	Address.	3554 WAFFLE Terrace	
	North Port, FL 34287		North Port, FL. 34286	
Name and Tit	le: MIKE LAMBERT (C) CHAIRMAN	Name and Title:	Terry Frein (T) Treasurer	\ \
Address				
	2320 Topsy Terrace		2744 STATULEW AVE	
	NorTh Part, FL. 34286		North Port, FL. 34288	
Name and Tit	le:	Name and Title:		
Address		Address:	***	
				\

Name and Title:		Name and Title:			
Address		Address:			
Name and Title:		Name and Title:			
Address			:		
Address		Address.	·		
_					
ABTICLETA	AUGUSTURED ACCENT				
		OT acceptable) of the registered agent is	s:		
Name:	Gene Herbsi	, 			
Address:	14156 TAMIAMI TVAIL				
	North Port, FL.	34287			
ARTICI F VII	<u>INCORPORATOR</u>				
	dress of the Incorporator is:				
Name:	Gene Herbs	<i>T</i>			
Address:	14156 TAMIAM	TYAIL			
	North Port, FL.	34287			
ARTICLE VIII	EFFECTIVE DATE:				
	ther than the date of filing:	(OPTIC	ONAL)	ç.)	
Effective date, if o	ite is fisieu, the date must be spi				
Effective date, if o	ite is fisted, the date indst be spi				
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North Port Moose Lodge 764

14156 Tamami Trail North Port, Florida 34287 941-426-2126 Fax 941-423-4476

To: Florida Department of State

Ref letter 017A00020807

Doc # NO1200

Per your letter attached and my conversation with your folks at the state department, all you need is this affidavit stating that we are not going to reinstate the old document corporation number NO1200. We hereby release the name of the corporation.

Gene Herbst

North Port Moose Lodge 764

Lene Herbst

Administrator

Signed before me on Oct 30, 2017

Notary foote 1

